

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Jane Rocio Evans

DEFENDANT

Baker Places, Inc.

COURT CASE NUMBER

C08-776 WHA

TYPE OF PROCESS

Summons, Complaint, Orders

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Baker Places, Inc., 600 Townsend St., Suite 200e

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

San Francisco, CA 94103

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Jane Rocio Evans
PO Box 424886
San Francisco, CA 94142Number of process to be
served with this Form 285

5

Number of parties to be
served in this case

1

Check for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):

Fold

RECEIVED
UNITED STATES MARSHAL
NORTHERN DISTRICT
OF CALIFORNIA
08 FEB 12 PM 2:02
2/11/08

Signature of Attorney other Originator requesting service on behalf of:

SUSAN IMBRIANI

PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

415-522-2061

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINEI acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 11

District to
Serve

No. 11

Signature of Authorized USMS Deputy or Clerk

Date

2/12/08

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

X Yolanda McDaniel - OFFICE MANAGER

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date
02/26/08Time 930 ☒ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$150

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00